

## ORDER FOR SUPPLIES OR SERVICES

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 05/21/2008		2. CONTRACT NO. (if any) SAQMPD05D1115		6. SHIP TO:	
3. ORDER NO. SAQMMMA07F0534		4. REQUISITION/REFERENCE NO. AQ 1069-7Z3296		a. NAME OF CONSIGNEE OFFICE OF SECURITY TECHNOLOGY (DS/C/ST)	
5. ISSUING OFFICE (Address correspondence to) OFFICE OF ACQUISITION MANAGEMENT (A/LM/AQM) PO BOX 9115, ROSSLYN STATION US DEPARTMENT OF STATE ARLINGTON, VA 22219				b. STREET ADDRESS 1400 WILSON BLVD SA-14 1ST FLOOR	
CONTACT NAME: Bernice L. Barnes		PHONE: 703-875-6098 EMAIL: BarnesBL2@state.gov		c. CITY ROSSLYN	d. STATE VA
7. TO:				e. ZIP CODE 22209-0000	
a. NAME OF CONTRACTOR		DUNS NUMBER		f. SHIP VIA SURFACE	
b. COMPANY NAME SIEMENS GOVERNMENT SERVICES				8. TYPE OF ORDER	
c. STREET ADDRESS 1881 CAMPUS COMMONS DR				<input type="checkbox"/> a. PURCHASE <input checked="" type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY RESTON		e. STATE VA		f. ZIP CODE 20191-1519	
9. ACCOUNTING AND APPROPRIATION DATA See Line Items				10. REQUISITIONING OFFICE OFFICE OF SECURITY TECHNOLOGY (DS/C/ST) 1400 WILSON BLVD SA-14 1ST FLOOR ROSSLYN, VA 22209-0000	
11. BUSINESS CLASSIFICATION (Check appropriate box(es))				12. F.O.B. POINT Destination	
<input type="checkbox"/> a. SMALL <input type="checkbox"/> d. WOMEN-OWNED <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> e. HUBZone		<input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> f. EMERGING SMALL BUSINESS		<input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED	
13. PLACE OF		14. GOVERNMENT BA. NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 04/30/2008	
a. INSPECTION		b. ACCEPTANCE		16. DISCOUNT TERMS 0 Days: 0 Days: 0 Days:	
17. SCHEDULE (See reverse for Rejections)					

## SEE LINE ITEMS SECTION

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		\$272,289.00	17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO:							
	a. NAME GLOBAL FIN. SVCS (RM/GFS/ADO/FM) CHARLESTON, SOUTH						\$272,289.00	17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box) PO BOX 150008; Fax To: 1-866-483-3436 OFFICE OF CLAIMS (RM/GFS/F/C)							
c. CITY CHARLESTON			d. STATE SC	e. ZIP CODE 29415-5008				
22. UNITED STATES OF AMERICA BY (Signature)						23. NAME (Typed) L. Kiazan Moneypenny TITLE: CONTRACTING/ORDERING OFFICER		

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